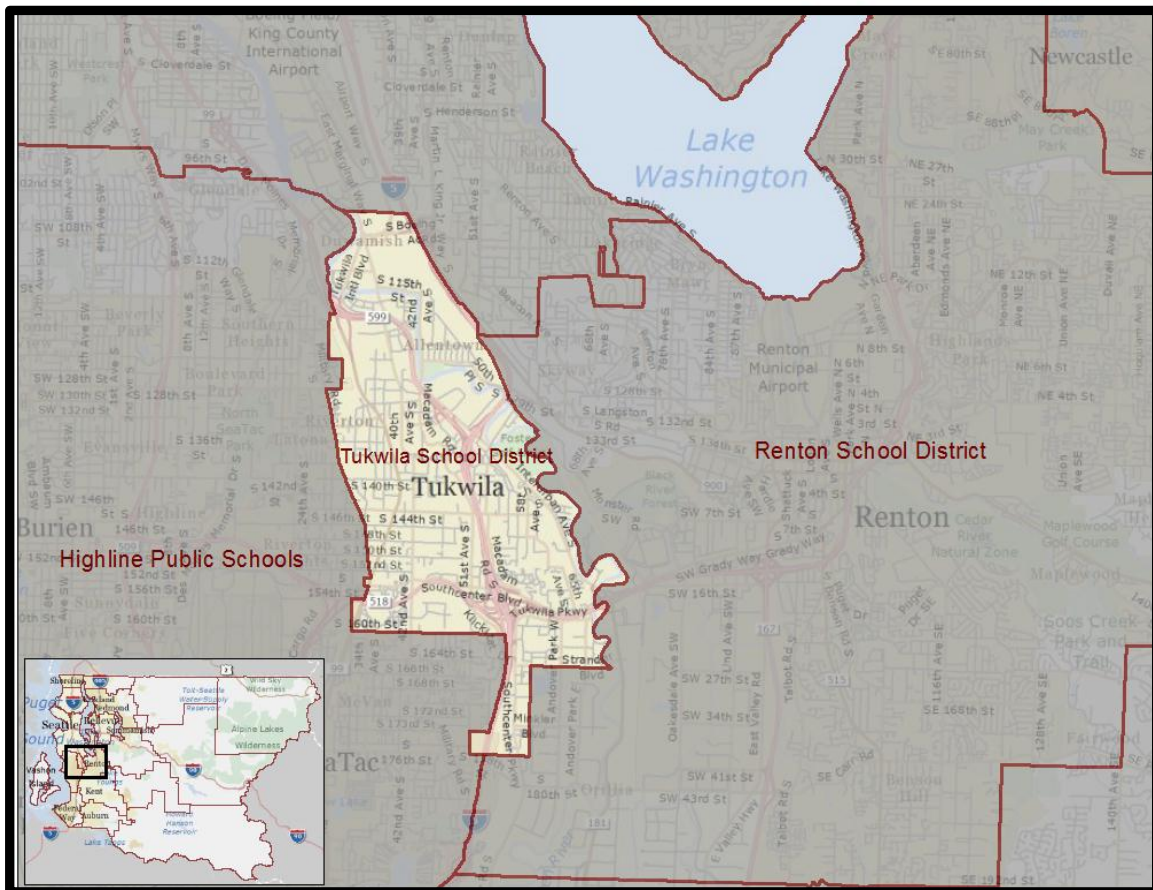




# Tukwila School District Health Profile

## King County, Washington

### (HYS 2012)



Suggested citation: Assessment, Policy Development & Evaluation Unit. *School District Health Profile: [School district name]*. Seattle, WA: Public Health – Seattle & King County, 2013.

# Introduction

The Healthy Youth Survey (HYS) is a collaborative effort of the Office of the Superintendent of Public Instruction, the Department of Health, the Department of Social and Health Service's Division of Behavioral Health and Recovery, the Department of Commerce, and the Liquor Control Board.

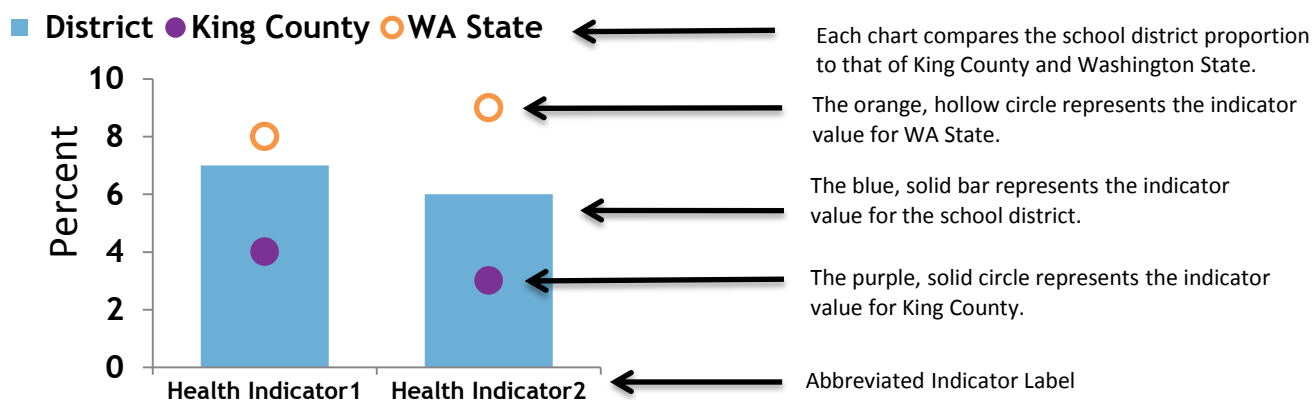
The survey provides important information about youth in Washington State. The Information from HYS is used to guide policy and programs that serve youth and to identify trends in the patterns of behavior over time. In October of even-numbered years, since 2002, students in grades 6, 8, 10, and 12 answered questions about safety and violence, physical activity and diet, alcohol, tobacco and other drug use, and related risk and protective factors.

This School District Health Profile, developed by Public Health in collaboration with school districts, summarizes HYS data to provide information on key health indicators and their determinants. It combines all grades for which the question is asked for 2012 point estimates (see pages 3-9) and stratifies by 8<sup>th</sup> graders and 10<sup>th</sup> and 12 graders combined for point estimates from 2004-2012 (see page 10). Comparisons for statistically significant differences between 2010 and 2012 estimates are also included (see page 11). Responses are weighted to district level enrollment by gender and grade level to ensure data were representative of all students in the district within the sampled grades.

The purpose of the report is to inform school policy-makers, health and wellness planners, and the public about student health at the district level. In this series of school district health profiles, King County is divided into 19 school districts. For each of the 19 school districts, the report includes five sections:

- Demographics of survey respondents
- Obesity, physical activity and dietary behavior
- Mental health, personal safety and violence
- Alcohol, tobacco and other drug use and secondhand smoke exposure
- District specific indicators of special interest

For each section, data are presented in a chart and a table. Below is a description on how to read the chart.



The table under each chart has more complete labels for the indicators in the chart. It also contains the actual indicator value for the school district. The table specifies whether or not the health indicator rate for the school district is significantly higher (↑), significantly lower (↓), or not different (-) from the King County point estimates based on overlapping confidence intervals. Additional tables provide within district comparisons by socio-economic status and race/ethnicity.

*This report is produced by the Assessment, Policy Development & Evaluation Unit at Public Health – Seattle & King County. For more information and update alerts, please visit <http://www.kingcounty.gov/healthservices/health/data.aspx> or contact [data.request@kingcounty.gov](mailto:data.request@kingcounty.gov)*

## Demographics of HYS (2012) Respondents

	Tukwila		King County <sup>1</sup>	WA State <sup>1</sup>
Total 2012 Respondents	n=552		n=51,943	n=33,270
Demographic		% <sup>1</sup>	%	%
Age (years)				
<=12	1	0.2	0.6	0.6
13-14	169	31.0	32.4	40.4
15-16	104	37.1	33.1	33.3
17-18	105	29.1	33.0	25.3
19+	10	2.6	0.8	0.5
Race/ethnicity				
White, NH <sup>2</sup>	49	9.5	45.6	52.6
Black, NH	85	15.4	7.4	4.0
Hispanic/Latino	116	20.4	10.5	15.0
American Indian/Alaska Native (AIAN), NH	6	1.0	1.7	3.5
Asian, NH	174	32.1	17.1	7.7
Native Hawaiian/Pacific Islander (NHPI), NH	31	5.9	2.3	1.6
Other (Includes multiracial)	89	15.6	15.4	15.7
Grade				
6	163	22.2	24.6	24.7
8	169	23.2	24.5	30.7
10	108	30.9	25.2	25.2
12	112	23.7	25.7	19.4
Gender				
Male	258	52.8	51.7	49.3
Female	294	47.2	48.3	50.7
Language				
Non-English speaking at home <sup>3</sup>	204	60.5	25.1	19.3
Socio-economic status (SES) <sup>4</sup>				
Lower SES	145	62.0	29.3	36.5
Moderate-higher SES	89	38.0	70.7	63.5

<sup>1</sup>King County respondents include all HYS 2012 voluntary and required participants; WA State respondents include only required HYS participants. All percentages for district, King County and WA presented are those with which survey weights have been applied.

<sup>2</sup>NH=non-Hispanic.

<sup>3</sup>Speaking a language other than English at home.

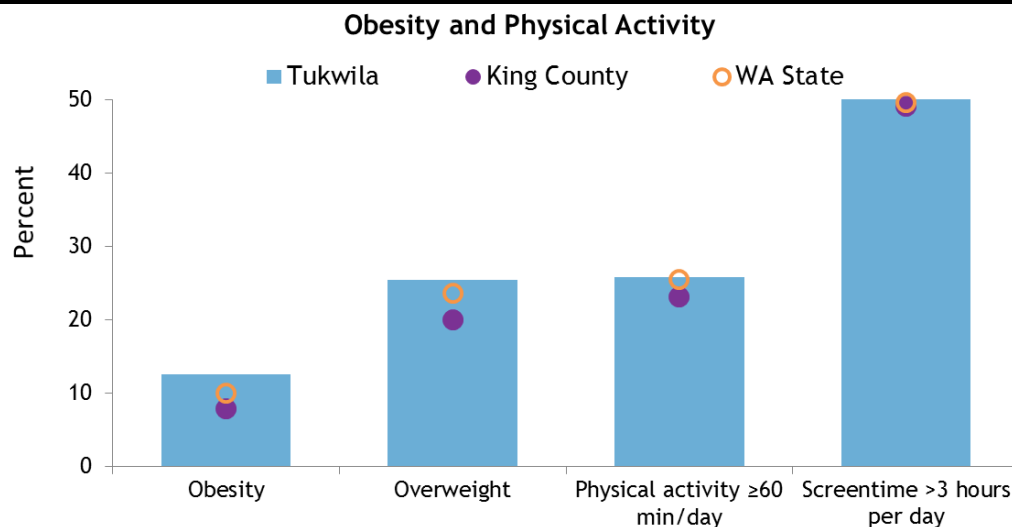
<sup>4</sup>Level of completed education by the student's mother is a proxy measure for SES. "Lower SES" corresponds to no post-high school maternal education and "moderate - higher SES" if maternal education includes any post-high school education.

### Non-English languages spoken at home reported by Tukwila HYS (2012) respondents grades 8, 10 & 12

Language	N	% <sup>1</sup>
Spanish	61	16.6
Chinese	2	0.4
Vietnamese	26	8.3
Russian	2	0.9
Korean	1	0.2
Japanese	3	1.0
Ukrainian	0	0.0
Other (not specified)	109	33.1

## Obesity and Physical Activity

Obesity prevention and reduction remain a key focus area of school health and wellness programming. Children and adolescents who are obese are likely to be obese as adults and are therefore more at risk for adult health problems. Self-reported height and weight of students in grade 8, 10 and 12 are used to calculate body mass index (BMI). Obesity is defined as a BMI-for-age-and-gender  $\geq 95^{\text{th}}$  percentile. To promote health and prevent obesity, national guidelines recommend that youth engage in 60+ minutes of physical activity on most days of the week.



By school district, King County (KC) and state (WA)		Tukwila (HYS 2012)		KC	WA
Indicator	%	Tukwila vs. KC	%	%	
Obesity (top 5% BMI for age/gender)	13	↑	8	10	
Overweight or obese (top 15% BMI for age/gender)	26	↑	20	24	
Physical activity $\geq 60$ min/day <sup>1</sup>	26	↑	23	26	
Screen time >3 hours per day	52	-	49	50	

↓ Significantly lower than King County

- No difference

↑ Significantly higher than King County

By socio-economic status (SES)		Tukwila (Combined data from HYS 2008, 2010, 2012)			
Indicator		Low SES	Low vs. Mod/High	Moderate/High SES	
	%	%		%	
Obesity (top 5% BMI for age/gender)	9		-	17	
Overweight or obese (top 15% BMI for age/gender)	24		-	35	
Physical activity $\geq 60$ min/day <sup>1</sup>	21		-	22	
Screen time >3 hours per day	56		-	63	

↓ Significantly lower than Mod/High SES

- No difference

↑ Significantly higher than Mod/High SES

\* Data not available due to cell count <10

By race <sup>2</sup>		Tukwila (Combined data from HYS 2008, 2010, 2012)						
Indicator		Asian	AIAN	Black	Hispanic	NHPI	White	Other
	%	%	%	%	%	%	%	%
Obesity (top 5% BMI for age/gender)	9	33	10	19	34	15	10	
Overweight or obese (top 15% BMI for age/gender)	19	67	22	40	68	25	24	
Physical activity $\geq 60$ min/day <sup>1</sup>	22	26	21	21	37	17	24	
Screen time >3 hours per day	57	62	54	65	49	63	51	

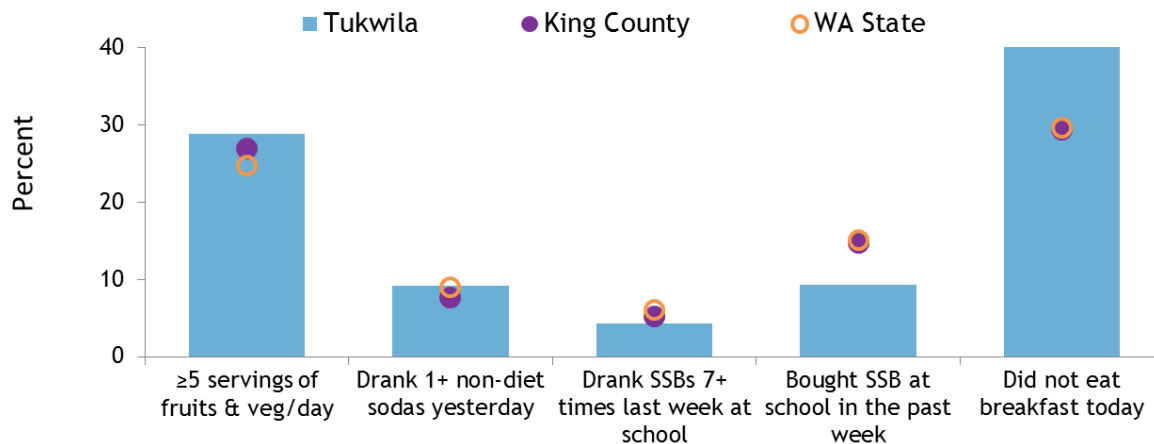
<sup>1</sup>Indicator includes 6<sup>th</sup> grade respondents. Not all questionnaire items were included in the 6<sup>th</sup> grade version

<sup>2</sup>AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution. \* Denotes data not available due to limited or no respondents from that race/ethnicity category.

## Dietary Habits

Healthy lifestyle habits, including healthy eating, can lower the risk of becoming obese and developing related diseases. Schools play a particularly critical role by establishing a safe and supportive environment with policies and practices that support healthy behaviors, including reducing consumption of sugary sweetened beverages (SSBs). Schools also provide opportunities for students to learn about and practice healthy eating and physical activity behaviors.

**Dietary Behaviors**



### By school district, King County (KC) and state (WA)

Indicator	Tukwila (HYS 2012)		KC	WA
	%	Tukwila vs. KC	%	%
≥5 servings of fruits & veg/day	29	■	27	25
Drank 1+ non-diet sodas yesterday <sup>1</sup>	9	■	8	9
Drank SSBs 7+ times last week at school	4	■	5	6
Bought SSB at school in the past week	9	■	15	15
Did not eat breakfast today <sup>1</sup>	45	▲	27	25

↓ Significantly lower than King County  
 - No difference  
 ↑ Significantly higher than King County

### By socio-economic status (SES)

Indicator	Tukwila (Combined data from HYS 2008, 2010, 2012)		
	Low SES %	Low vs. Mod/High	Moderate/High SES %
≥5 servings of fruits & veg/day	29	■	28
Drank 1+ non-diet sodas yesterday <sup>1</sup>	13	■	10
Drank SSBs + times last week at school	7	■	9
Bought SSB at school in the past week	18	■	15
Did not eat breakfast today <sup>1</sup>	48	■	43

↓ Significantly lower than Mod/High SES  
 - No difference  
 ↑ Significantly higher than Mod/High SES  
 \* Data not available due to cell count <10

### By race<sup>2</sup>

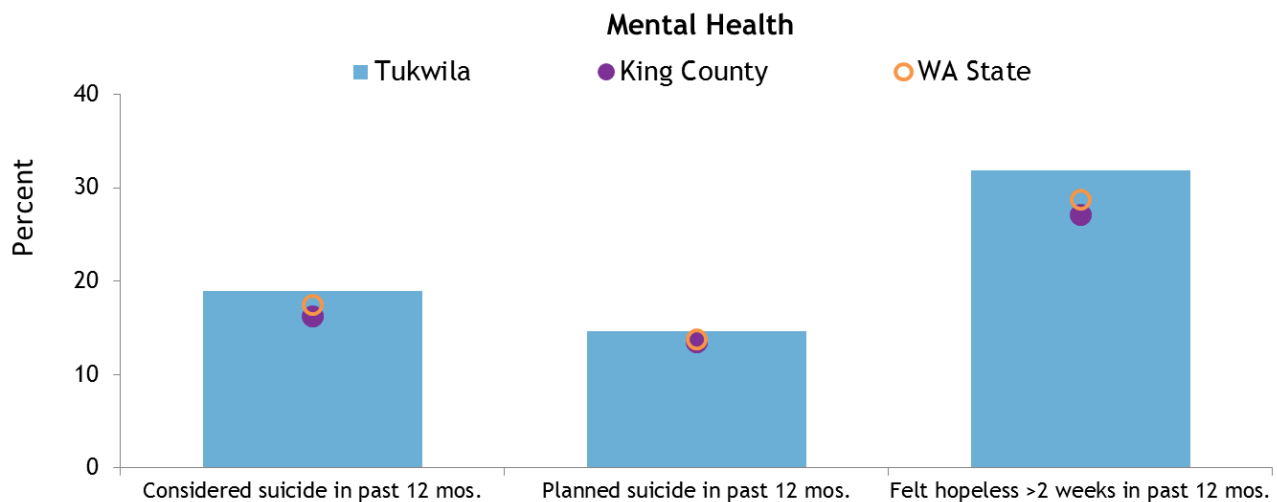
Indicator	Tukwila (Combined data from HYS 2008, 2010, 2012)						
	Asian %	AIAN %	Black %	Hispanic %	NHPI %	White %	Other %
≥5 servings of fruits & veg/day <sup>1</sup>	36	*	26	32	25	18	27
Drank 1+ non-diet sodas yesterday	10	47	8	12	19	17	10
Drank SSBs 7+ times last week at school	2	*	17	11	17	5	10
Bought SSB at school in the past week	8	23	27	16	22	14	16
Did not eat breakfast today <sup>1</sup>	42	55	41	55	63	33	43

<sup>1</sup>Indicator includes 6<sup>th</sup> grade respondents. Not all questionnaire items were included in the 6<sup>th</sup> grade version

<sup>2</sup>AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution. \*Denotes data not available due to limited or no respondents from that race/ethnicity category.

## Mental Health

Mental health is important to overall health. Mental disorders are chronic health conditions that can continue throughout the lifespan. Without early diagnosis and treatment, youth with mental disorders can have problems at home, in school, and in forming friendships. This can also interfere with their healthy development, and these problems can continue into adulthood. Suicide (i.e., taking one's own life) is a serious public health problem that affects even young people. For youth between the ages of 10 and 24, suicide is the third leading cause of death. Suicide affects all youth, but some groups are at higher risk than others.



### By school district, King County (KC) and state (WA)

Indicator	Tukwila (HYS 2012)		KC	WA
	%	Tukwila vs. KC	%	%
Considered suicide in past 12 mos.	19	■	16	18
Planned suicide in past 12 mos.	15	■	14	14
Felt hopeless >2 weeks in past 12 mos.	32	■	27	29

↓ Significantly lower than King County  
 - No difference  
 ↑ Significantly higher than King County

### By socio-economic status (SES)

Indicator	Tukwila (Combined data from HYS 2008, 2010, 2012)		
	Low SES	Low vs. Mod/High	Moderate/High SES
	%		%
Considered suicide in past 12 mos.	20	■	17
Planned suicide in past 12 mos.	14	■	13
Felt hopeless >2 weeks in past 12 mos.	33	■	29

↓ Significantly lower than Mod/High SES  
 - No difference  
 ↑ Significantly higher than Mod/High SES  
 \*Data not available due to cell count <10

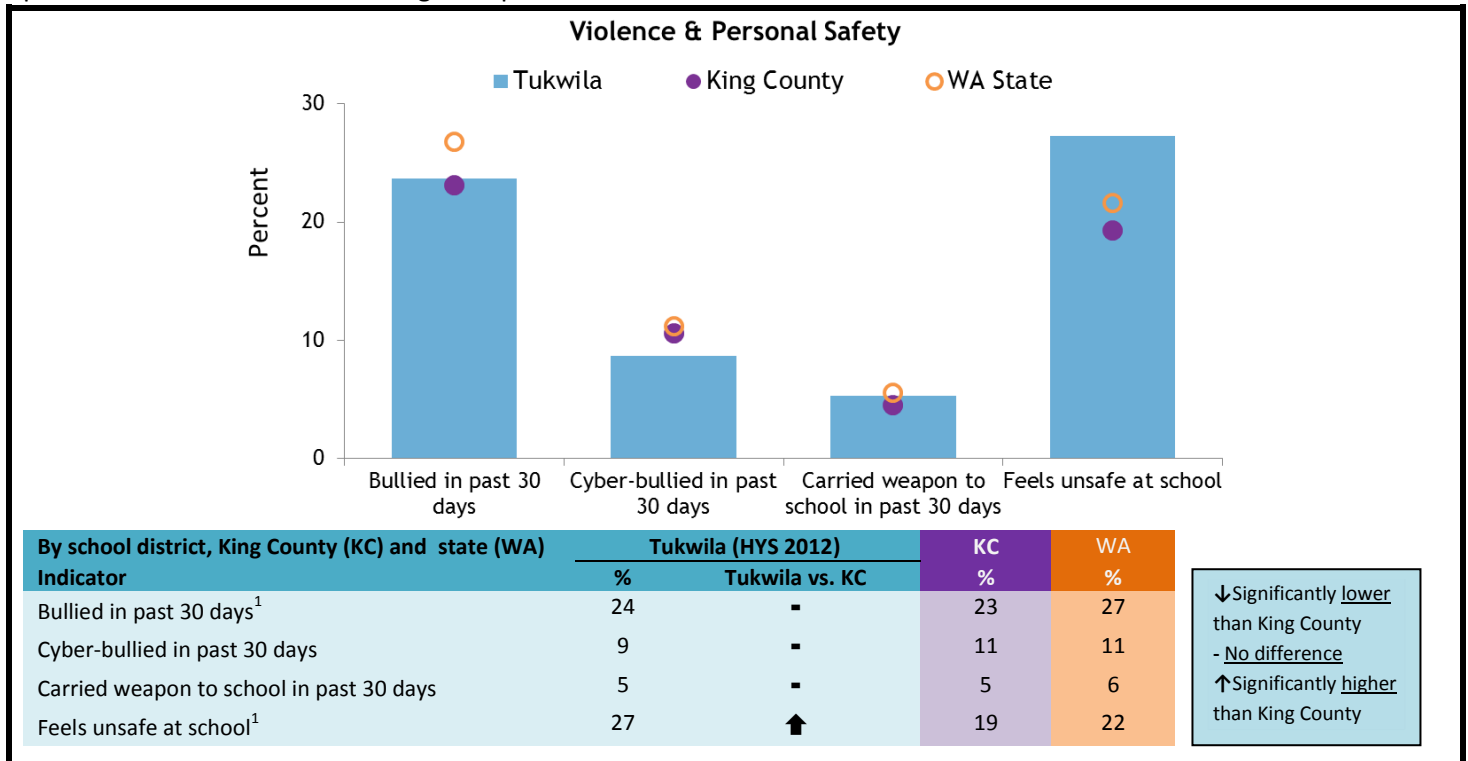
### By race<sup>1</sup>

Indicator	Tukwila (Combined data from HYS 2008, 2010, 2012)						
	Asian	AIAN	Black	Hispanic	NHPI	White	Other
	%	%	%	%	%	%	%
Considered suicide in past 12 mos.	17	32	17	13	24	17	22
Planned suicide in past 12 mos.	15	*	12	9	4	14	18
Felt hopeless >2 weeks in past 12 mos.	38	23	28	24	28	30	39

<sup>1</sup>AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution. \*Denotes data not available due to limited or no respondents from that race/ethnicity category.

## Violence & Personal Safety

Youth violence includes various behaviors. Some violent acts—such as bullying, slapping, or hitting—can cause more emotional harm than physical harm. Bullying is a form of youth violence and is widespread in the United States. Bullying can also occur through technology and is called electronic aggression or cyber-bullying. Cyber-bullying is bullying that occurs through e-mail, a chat room, instant messaging, a website, text messaging, or videos or pictures posted on websites or sent through cell phones.



By socio-economic status (SES)		Tukwila (Combined data from HYS 2008, 2010, 2012)					
Indicator		Low SES	Low vs. Mod/High	Moderate/High SES			
		%		%			
Bullied in past 30 days <sup>1</sup>		22	■	24			
Cyber-bullied in past 30 days		12	■	8			
Carried weapon to school in past 30 days		6	■	8			
Feels unsafe at school <sup>1</sup>		31	■	30			

By race <sup>2</sup>		Tukwila (Combined data from HYS 2008, 2010, 2012)						
Indicator		Asian	AIAN	Black	Hispanic	NHPI	White	Other
		%	%	%	%	%	%	%
Bullied in past 30 days <sup>1</sup>		25	37	26	22	18	24	21
Cyber-bullied in past 30 days		8	23	10	9	11	8	17
Carried weapon to school in past 30 days		7	5	6	9	8	5	6
Feels unsafe at school <sup>1</sup>		23	34	32	29	29	24	26

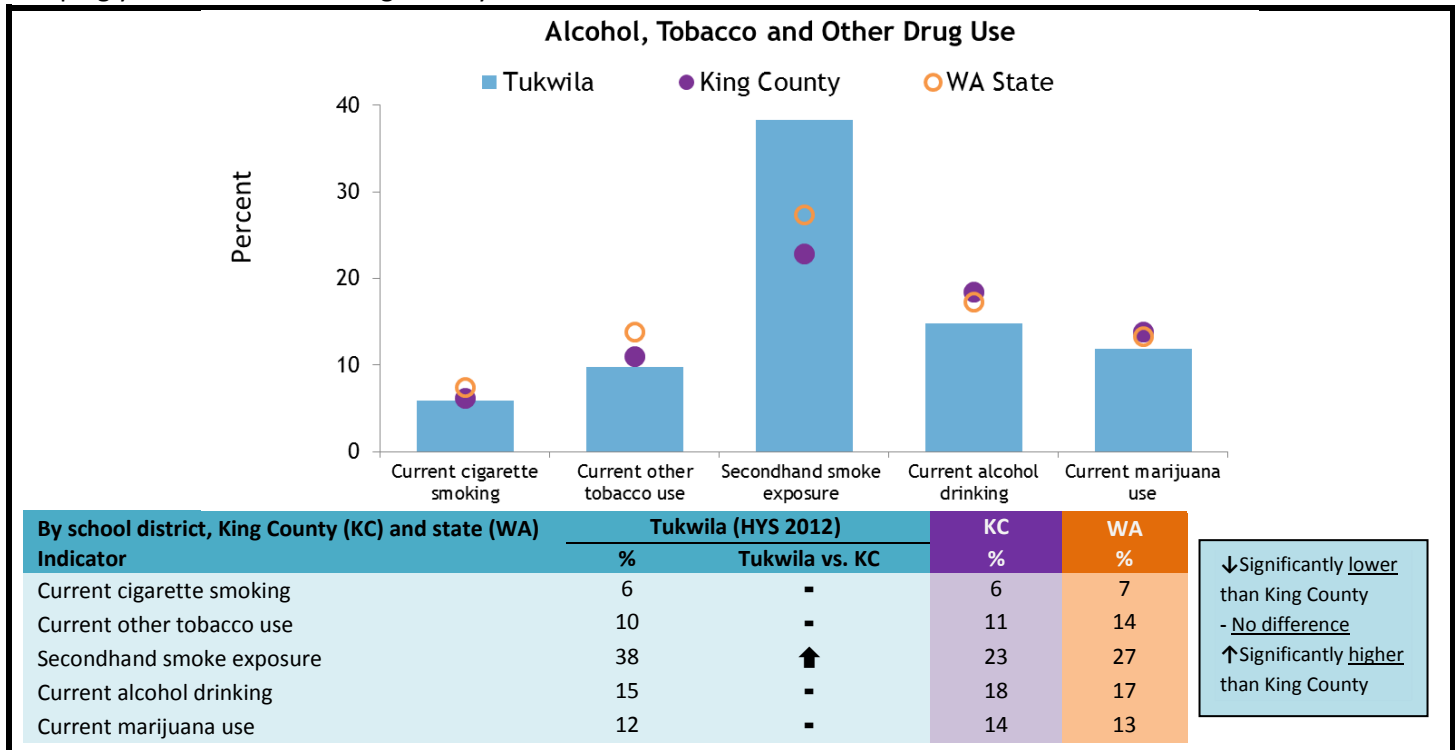
<sup>1</sup>Indicator includes 6<sup>th</sup> grade respondents. Not all questionnaire items were included in the 6<sup>th</sup> grade version

<sup>2</sup>AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution. \*Denotes data not available due to limited or no respondents from that race/ethnicity category.



## Alcohol, Tobacco and Other Drug Use

Alcohol and other drug use among our nation's youth remains a major public health problem. Substance use and abuse can increase the risk for injuries, violence, HIV infection, and other diseases. Smoking and other tobacco use are initiated and established primarily during adolescence. Tobacco use in adolescence is associated with use of alcohol, use of marijuana and other drugs, and high-risk sexual behavior. Schools play a critical role in promoting health and helping youth establish lifelong healthy behaviors.



By socio-economic status (SES)		Tukwila (Combined data from HYS 2008, 2010, 2012)		
Indicator		Low SES %	Low vs. Mod/High	Moderate/High SES %
Current cigarette smoking		10	■	9
Current other tobacco use		13	■	14
Secondhand smoke exposure		42	■	35
Current alcohol drinking		23	■	24
Current marijuana use		22	■	21

↓ Significantly lower than Mod/High SES  
 - No difference  
 ↑ Significantly higher than Mod/High SES

By race <sup>2</sup>		Tukwila (Combined data from HYS 2008, 2010, 2012)					
Indicator		Asian %	AIAN %	Black %	Hispanic %	NHPI %	White %
Current cigarette smoking		5	15	7	9	15	7
Current other tobacco use		9	58	19	11	13	10
Secondhand smoke exposure		34	18	19	31	67	40
Current alcohol drinking		9	14	14	24	22	18
Current marijuana use		7	26	17	16	25	14

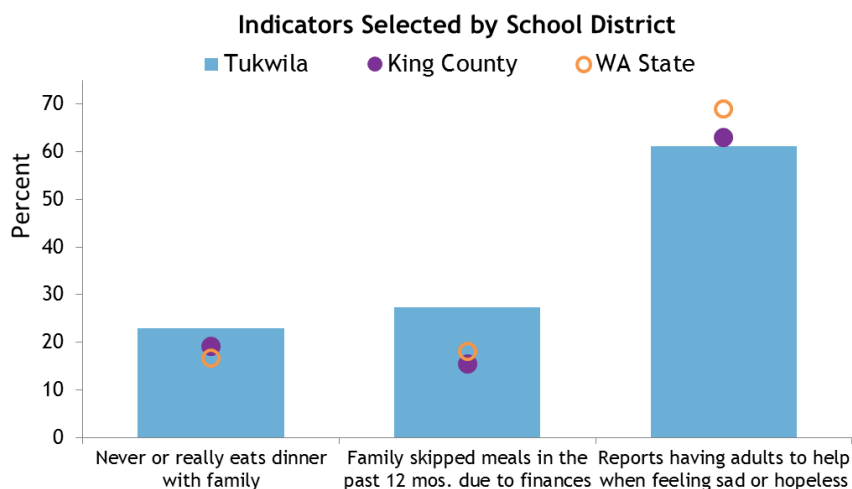
<sup>1</sup>Indicator includes 6<sup>th</sup> grade respondents. Not all questionnaire items were included in the 6<sup>th</sup> grade version

<sup>2</sup>AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution. \*Denotes data not available due to limited or no respondents from that race/ethnicity category.



## Indicators Selected by Tukwila School District

Indicators of special interest were selected from questionnaire items on the 2012 HYS questionnaire by key health and wellness personnel at individual school districts. Special interest indicators included sexual health, however low response rates for sexual health questionnaire items resulted in imprecise estimates and were therefore not included in this report. Selected indicators reflect issues identified as priorities by health and wellness leadership of each school district. This set of indicators is unique to each school district.



By school district, King County (KC) and state (WA)		Tukwila (HYS 2012)		KC	WA
Indicator	%	Tukwila vs. KC	%	%	
Never or rarely eats dinner with family	23	▬	19	17	
Family skipped meals in the past 12 mos. due to finances	27	↑	15	18	
Adults to turn to for help when feeling sad or hopeless	61	▬	63	69	

↓ Significantly lower than King County

- No difference

↑ Significantly higher than King County

By socio-economic status (SES)		Tukwila (Combined data from HYS 2008, 2010, 2012)		
Indicator		Low SES	Low vs. Mod/High	Moderate/High SES
		%		%
Never or rarely eats dinner with family		28	▬	29
Family skipped meals in the past 12 mos. due to finances		30	▬	21
Adults to turn to for help when feeling sad or hopeless		51	▬	60

↓ Significantly lower than Mod/High SES

- No difference

↑ Significantly higher than Mod/High SES

\*Data not available due to cell count <10

By race <sup>1</sup>		Tukwila (Combined data from HYS 2008, 2010, 2012)						
Indicator		Asian	AIAN	Black	Hispanic	NHPI	White	Other
		%	%	%	%	%	%	%
Never or rarely eats dinner with family		19	16	33	24	24	27	23
Family skipped meals in the past 12 mos. due to finances		30	55	22	19	34	19	28
Adults to turn to for help when feeling sad or hopeless		52	28	65	55	64	64	59

<sup>1</sup>Indicator includes 6<sup>th</sup> grade respondents. Not all questionnaire items were included in the 6<sup>th</sup> grade version

<sup>2</sup> AIAN=American Indian/Alaska Native; NHPI=Native Hawaiian/Pacific Islander; Hispanic considered as a separate group and not included in any other group. Race/ethnicity categories may have a small number of respondents (see Demographic Table on page 3); estimates should be interpreted with caution.

## Key findings in HYS data from 2004-2012

HEALTHY YOUTH SURVEY (HYS)	8 <sup>th</sup> Grade <sup>1</sup>					10 <sup>th</sup> & 12 <sup>th</sup> Grade <sup>1</sup>				
SURVEY YEAR	2004	2006	2008	2010	2012	2004	2006	2008	2010	2012
(# OF PARTICIPATING STUDENT)	154	148	165	177	169	167	140	253	249	220
Obesity	%					%				
Obesity <sup>2</sup>	21	13	22	12	13	16	13	13	14	13
Overweight or obese <sup>2</sup>	43	40	39	32	28	30	24	26	31	25
Physical Activity	%					%				
Physical activity ≥60 min/day	-	13	16	21	26	-	9	11	18	24
Screen time >3 hours per day	64	71	69	59	66	51	47	59	57	45
Dietary Behavior	%					%				
≥5 servings of fruits & veg/day	24	29	23	-	30	28	20	31	-	28
Drank 1+ non-diet sodas yesterday	16	25	16	11	10	24	17	10	13	11
Drank SSBs 7+ times last week at school <sup>3</sup>	-	13	6	4	1	-	25	15	14	6
Bought SSB at school in the past week <sup>3</sup>	-	20	8	1	5	-	39	27	27	12
Did not eat breakfast today	-	45	46	42	48	-	52	50	48	48
Mental Health	%					%				
Considered suicide in past 12 mos.	24	13	14	24	15	17	10	17	17	21
Planned suicide in past 12 mos.	15	9	11	15	15	15	4	13	11	15
Felt hopeless >2 weeks in past 12 mos.	35	33	28	34	27	38	29	31	34	34
Personal Safety and Violence	%					%				
Bullied in past 30 days	32	31	28	27	35	19	20	17	21	18
Cyber-bullied in past 30 days	-	12	5	8	6	-	6	14	16	10
Carried weapon to school in past 30 days	-	10	8	7	3	-	11	6	8	6
Feels unsafe at school	31	40	31	30	31	31	28	23	30	31
Tobacco Use and Exposure	%					%				
Current cigarette smoking	5	5	8	9	2	14	12	12	10	10
Current other tobacco use <sup>4</sup>	11	8	18	13	5	19	22	15	10	12
Secondhand smoke exposure <sup>5</sup>	33	35	36	36	27	43	38	41	36	45
Alcohol & Other Drug Use	%					%				
Current alcohol drinking	15	20	21	18	10	41	33	25	24	23
Current marijuana use	7	11	14	16	10	20	16	16	27	18
Indicators of Special Interest	%					%				
Never or rarely eats dinner with family	23	18	29	20	32	32	39	29	29	26
Family skipped meals in the past 12 mos. due to finances	17	17	18	19	16	17	16	27	27	35
Adults to turn to for help when feeling sad or hopeless	-	70	49	45	62	-	60	58	53	52

<sup>1</sup>Data not available denoted by (-).<sup>2</sup>Obesity (top 5%) and overweight or obese (top 15%) of BMI distribution for age/gender were calculated from self-reported height and weight.<sup>3</sup>Includes non-diet soda and other sugary sweetened beverages such as Snapple, Gatorade, and Sobe.<sup>4</sup>Results should be interpreted with caution, 30% or more of respondents did not answer the question.<sup>5</sup>The question "Do you live with someone who smokes now?" used as a proxy for secondhand smoke exposure.

Produced by the Assessment, Policy Development &amp; Evaluation Unit of Public Health -- Seattle &amp; King County

## Tukwila School District HYS Comparison from 2010-2012

HEALTHY YOUTH SURVEY (HYS)	8 <sup>th</sup> Grade <sup>1</sup>	10 <sup>th</sup> & 12 <sup>th</sup> Grade <sup>1</sup>
Comparison Years	2006 & 2008 vs 2010 & 2012	2006 & 2008 vs 2010 & 2012
<b>Obesity</b>		
Obesity <sup>2</sup>	-	-
Overweight or obese <sup>2</sup>	-	-
<b>Physical Activity</b>		
Physical activity ≥60 min/day	-	-
Screen time >3 hours per day	-	-
<b>Dietary Behavior</b>		
≥5 servings of fruits & veg/day (2010 data not available)	N/A	N/A
Drank 1+ non-diet sodas yesterday	-	-
Drank SSBs 7+ times last week at school <sup>3</sup>	-	-
Bought SSB at school in the past week <sup>3</sup>	↓	↓
Ate breakfast today	-	-
<b>Mental Health</b>		
Considered suicide in past 12 mos.	-	-
Planned suicide in past 12 mos.	-	-
Felt hopeless >2 weeks in past 12 mos.	-	-
<b>Personal Safety and Violence</b>		
Bullied in past 30 days	-	-
Cyber-bullied in past 30 days	-	-
Carried weapon to school in past 30 days	-	-
Feels unsafe at school	-	-
<b>Tobacco Use and Exposure</b>		
Current cigarette smoking	-	-
Current other tobacco use <sup>4</sup>	-	-
Secondhand smoke exposure <sup>5</sup>	-	-
<b>Alcohol &amp; Other Drug Use</b>		
Current alcohol drinking	-	-
Current marijuana use	-	-
<b>Indicators Selected by School District</b>		
Never or rarely eats dinner with family	-	-
Family skipped meals in the past 12 mos. due to finances	-	-
Adults to turn to for help when feeling sad or hopeless	-	-

Trend Symbols
Getting Better
No Change
Getting Worse
↑ Higher in 2012 than 2010
-- Flat, No Change
↓ Lower in 2012 than 2010
N/A: non-applicable
* Data not available due to low school participation

<sup>1</sup>Not all questionnaire items are included every year. Years when data are not available for specific indicators are noted beside indicators in table and excluded from the comparison

<sup>2</sup>Obesity (top 5%) and overweight or obese (top 15%) of BMI distribution for age/gender were calculated from self-reported height and weight.

<sup>3</sup>Includes non-diet soda and other sugary sweetened beverages such as Snapple, Gatorade, and Sobe.

<sup>4</sup>Results should be interpreted with caution, 30% or more of respondents did not answer the question.

<sup>5</sup>The question "Do you live with someone who smokes now?" used as a proxy for secondhand smoke exposure.